The following scholarships are available for 2015-2016. You may apply by completing the SSU Development Foundation Scholarship Application below. These scholarships must be applied for using the paper application. Online applications are not available. Applications are due by October 30, 2015.

**American Savings Bank (1 @ $1000)**
Full-time or part-time employee of American Savings Bank or a child or grandchild of an American Savings Bank employee and 2.8 GPA.

**Dr. John Walker Allied Health Scholarship (1 @ $1215)**
Graduate of Portsmouth West High School with a 3.0 GPA. Must be accepted in an allied health program. Required Program: Health sciences

**Gina Smalley Scholarship (1 @ $500)**
Student accepted into the dental hygiene program and a resident of Adams or Highland counties with preference to a graduate of Peebles High School. Exhibit financial need.

**Home for Aged Women (31 @ $500)**
Female student pursuing an associate degree. Must be studious and demonstrate financial need. Required Program: Health sciences

**James Gambill Memorial Scholarship (1 @ $1000)**
A "second chance" scholarship for SSU students. Must have attended SSU, been placed on academic suspension, used the appeal process to gain readmittance, and successfully completed the term following readmittance.

**James Miller Scholarship (3 @ $1000)**
College sophomores, juniors, or seniors who reside in southern Ohio or northern Kentucky, seeking either an associate or baccalaureate degree. Required Program: Business

**Linda Bradshaw Walker Education Scholarship (1 @ $1215)**
Graduate of Portsmouth West High School with a 3.0 GPA. Must be accepted in the education program. Required Program: Education

**Lute Family Scholarship (4 @ $425)**
Student entering sophomore year, with a minimum 3.0 GPA. Need-based award with preference to middle income. Required Program: Business major with general business, accounting, management information systems, or business administration concentration
Mary Elizabeth Schwartz Scholarship (5 @ $525)
Student with a minimum 3.0 GPA who demonstrates financial need. Required Program: English major

Richards Health Scholarship (9 @ $1000, 1 @ $900)
Scioto County student of at least sophomore standing with a 3.0 GPA or better. Required Program: Associate degree in physical therapy or respiratory therapy, a bachelor's degree in nursing, or a master's degree in occupational therapy

Spriggs Family Scholarship (2 @ $1000)
Full-time student with a 3.0 GPA. Must be a son or daughter of a Scioto County firefighter, police officer, state trooper, or sheriff deputy who has been a full-time employee for at least one year. Letter of employment verification is required

Stan Callihan Scholarship (1 @ $500)
Middle income, full-time student in good academic standing. Preference given to Kentucky residents. Required Program: Education with a history or social science concentration

Wayne White Scholarship (1 @ $500)
Applicant must be a graduating senior from Dawson Bryan or Symmes Valley High School, both in Lawrence County, Ohio. (Applicant shall no longer be required to submit an essay as part of their application.) Applications will be made on the standard Shawnee State University application form. Recipient will be chosen by the Shawnee State University Office of Financial Aid. Recipient of the award must be enrolled full time in Shawnee State University. Preference shall be given to first generation students and students who demonstrate a record of college preparedness in their high school studies.
SSU Development Foundation
2015-2016 Scholarship Application

Name_________________________________________ Student ID_________

Please select the scholarship for which you would like to be considered:

☐ American Savings Bank

☐ Dr. John Walker Allied Health Scholarship

☐ Gina Smalley Scholarship

☐ Home for Aged Women

☐ James Gambill Memorial Scholarship

☐ James Miller Scholarship

☐ Linda Bradshaw Walker Education Scholarship

☐ Lute Family Scholarship

☐ Mary Elizabeth Schwartz Scholarship

☐ Richards Health Scholarship

☐ Spriggs Family Scholarship

☐ Stan Callihan Scholarship

☐ Wayne White Scholarship
SSU Development Foundation
Scholarship Application
Award Year 2015-2016

Please complete this application and return it to the Student Business Center, Shawnee State University, 940 Second Street, Portsmouth, Ohio 45662-4344.

Important: February 1, 2015 is the application deadline for Development Foundation scholarships. Although answering any item on this form is optional, you will be considered for every available award only if all questions are completed.

Scholarship eligibility requires:
- Application for admission to a degree program.
- High school transcript or G.E.D. score.
- ACT/SAT scores.
- College transcripts (if applicable).
- Completion of the Free Application for Federal Student Aid (FAFSA) with EFC number by February 15, 2015 for need-based scholarships.

Name ____________________________ ID ____________________________

Address ____________________________ City ____________________________ State __________ Zip __________

Birthdate ____________________________

U. S. Citizen: ☐ Yes ☐ No                Gender: ☐ Male ☐ Female

List honors, awards, recognitions received:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

List high school/college activities, clubs:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Specifically describe extent of involvement in community activities and organizations:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Indicate length of time involved in community activities and organizations:

☐ 0-10 Hours    ☐ 11-20 Hours    ☐ 21-40 Hours    ☐ 41-80 Hours    ☐ Over 80 Hours

Briefly describe your career goal:

________________________________________________________________________

________________________________________________________________________

Complete back of form.
Please check the following scholarship-specific information if it applies to you.

☐ Son/daughter of a Scioto County firefighter, police officer, state trooper, or sheriff deputy. *(Submit proof with application.)*

☐ Mobility impaired (requiring use of wheelchair)

☐ American Savings Bank employee or child/grandchild of employee ____________________________ __________ 

☐ USEC American Centrifuge employee or immediate family member of employee ____________________________ 

☐ Child or grandchild of Vietnam veteran *(Submit DD214 of relative with application. Must live within a 50 mile radius of SSU to apply.)*

☐ Working full time while attending Shawnee State University

☐ Scioto County, Ohio 4-H member *(Submit copy of membership card with application.)*

☐ From single parent home

☐ Member of Shawnee State Honors Program

☐ Prior Bachelor's degree

☐ Maintained a 3.0 GPA in Foreign Language or Linguistics courses

☐ Graduate of Scioto County Career Technical Center in June, 2015 (for freshmen only)

☐ Attended & graduated from New Boston School District (Number of years: ___________)

☐ Attended & graduated from Washington Local School District (Number of years: ___________)

☐ Shawnee State senior whose athletic eligibility is exhausted

☐ Two East High School (Sciotosville) sports letters

☐ Recipient of Wendy's High School Heisman Award

* Important: If proof of membership or employment is not returned with scholarship application, student will not be considered for that particular scholarship.

By signing this application you give permission to the SSU Financial Aid Office to release financial and academic information to prospective donors.

I certify that I have read the form above in its entirety and that the information given herein is complete and accurate. I understand that I may lose or be required to repay funds that I receive if information, which affects financial aid award amounts, is omitted or inaccurate.

__________________________  __________________________
Student Signature                Date